

**SEEC FORM 21**

Short Form Campaign Finance Disclosure Statement

CONNECTICUT STATE ELECTIONS ENFORCEMENT COMMISSION

Rev. 1/07



Electronic Filing

Office Use Only

## 1. NAME OF COMMITTEE

**Chris Dwyer for CT**

## 2. TREASURER NAME

|       |              |          |                 |        |
|-------|--------------|----------|-----------------|--------|
| Title | First        | MI       | Last            | Suffix |
|       | <b>Peter</b> | <b>L</b> | <b>Castaldi</b> |        |

## 3. TREASURER ADDRESS

|                  |                |           |              |
|------------------|----------------|-----------|--------------|
| Street Address   | City           | State     | Zip Code     |
| <b>7 Arch St</b> | <b>Norwalk</b> | <b>CT</b> | <b>06850</b> |

## 4. ELECTION DATE

**11/03/2026**

## 5. OFFICE SOUGHT (if applicable)

**State Senator**

## 6. DISTRICT CODE (if applicable)

**S025**

## 7. CANDIDATE NAME

|       |                    |          |              |        |
|-------|--------------------|----------|--------------|--------|
| Title | First              | MI       | Last         | Suffix |
|       | <b>Christopher</b> | <b>A</b> | <b>Dwyer</b> |        |

## 8. TYPE OF REPORT

**July 10 Filing - Original**

## 9. PERIOD COVERED

Beginning Date

Ending Date

**04/01/2026**

thru

**06/30/2026**

## 10. CERTIFICATION



I hereby certify and state, under penalties of false statement, that the committee named above, did not receive contributions or other funds, or make or incur expenditures in excess of \$1000 for the period covered by this Short Form Campaign Finance Disclosure Statement.

**Electronic Filing**

SIGNATURE

**Peter Castaldi**

PRINT NAME OF THE SIGNER

**07/10/2026 11:21:48AM**

DATE CERTIFIED

PENALTY FOR FALSE STATEMENT IS PUNISHABLE BY FINE NOT TO EXCEED \$1,000,  
OR IMPRISONMENT FOR NOT MORE THAN ONE YEAR, OR BOTH.